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** CONTINUING DATA *****

This application is a CON of 10/135,143 04/30/2002 PAT 6,697,460

O.A.

** FOREIGN APPLICATIONS *****

NONE OA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/13/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	TX	7	20	3
Examiner's Signature: <u>Olisa Knott</u> Initials: <u>O.A.</u>				

ADDRESS

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TITLE

Adaptive voice recognition menu method and system

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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